

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Sharon Brown, Israely Jews and Christians,
USA, All parties concerned and affected

Write the full name of each plaintiff.

CV

(Include case number if one has been
assigned)

-against-

COMPLAINT

Columbia University, ^{Homestchools}
Harvard University ^{All schools}, Do you want a jury trial?
Public, Private, Pre K, Elementary,
Intermediate, High schools, Colleges, universities etc

Yes No

Write the full name of each defendant. If you need more
space, please write "see attached" in the space above and
attach an additional sheet of paper with the full list of
names. The names listed above must be identical to those
contained in Section II.

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I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

Federal Question
 Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

Right to Freedom OF Speech, Freedom
OF Religion, all applicable

B. If you checked Diversity of Citizenship

1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, Sharon Brown, is a citizen of the State of
(Plaintiff's name)

New York

(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

N/A

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, Harvard University, is a citizen of the State of
(Defendant's name)

Unknown state

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

If the defendant is a corporation:

The defendant, UJA is incorporated under the laws of
the State of NY
and has its principal place of business in the State of NY
or is incorporated under the laws of (foreign state) NY
and has its principal place of business in NY.

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

Sharon

L

Brown

First Name

Middle Initial

Last Name

130-10 140 Street Ste 1

Street Address

Jamaica

NY

11436

County, City

State

Zip Code

929-624-0164

Telephone Number

Sharonbrown51074@gmail.com

Email Address (if available)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1: Harvard university
First Name _____ Last Name _____

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

Defendant 2: Columbia University

First Name _____ Last Name _____

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

Defendant 3: Home schools
First Name _____ Last Name _____

First Name _____ Last Name _____

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

Defendant 4:

All Schools

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

III. STATEMENT OF CLAIM

Place(s) of occurrence:

School(s)

Date(s) of occurrence:

On Oct. 1, 2023, 9/11/2001, 1993, Prior and after.**FACTS:**

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

"Students" at schools were attacking real students in the Name of a fictitious place called "palestine" The actual name for "palestine" is Israel Gaza Israel; Judea and Samaria not "West Bank" The temple mount not "al aqsa mosque" Temple Remove "al aqsa mosque" from language teaching and facts about Israel's land and history/ Geography etc.

"Students" are "protesting" / Being terrorists against Jews and supporters of Jews, Israel and America.

The schools are incorporating fictitious "facts" about life like "homosexuality", "transgender", "boys are girls", "girls are boys", Israel is "palestine". The schools have actually incorporated lies and terrorism as lessons.

"Students" are abusing Jews and Christians and all who tell the truth about Israel, the Bible, like, gender, Sex. They call for intifada and Jihad which is terrorism against those who support Israel, Jews, America. They remove American and Jewish flags from universities etc. Removed prayer, Judaism and Christianity from schools. "Teachers" teach "students" antisemitism, Jew hatred, lies and INJURIES: terrorism against Jews, Israel, America, Truth.

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

People have been attacked, not able to go to class, not safe on campus, not safe in classes, not safe to wear items identifiably Jewish or Israeli, American, hinder education, devalue American universities, stop people from applying to these schools, teaching antisemitism.

State briefly what money damages or other relief you want the court to order.

1,000,000,000,000,000. Remove universities accreditation that teach antisemitism and that facilitate terrorism, revoke charters, Bldg permits, close colleges, universities, schools that won't cease antisemitism. Put prayer, worship, praise, Gospel music, Jewish music, Bible, Ten Commandments, maps that show it's Israel, not "palestine", etc. Put Judaism and Christianity back in schools. defund all antisemitic schools or private funds and government funds, ~~any~~ and all just and fair relief.

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

4/15/2025

Dated

Sharon L

First Name

Middle Initial

Sharon Brown

Plaintiff's Signature

Brown

Last Name

130-10 140 Street Ste 1

Street Address

11436

County, City

State

Zip Code

Jamaica NY

929-624-0164

Telephone Number

Sharonbrown51074@gmail.com

Email Address (if available)

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

Yes No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.